									Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD  Effective January 1, 2003									091	17	4487	4	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TC	OTAL CLAIMS						RAT	Ε	FEE	1	RATE	FEE	
FC	PR .		NUMBER	FILED	NUMB	ER EXTRA	BASIC	FEE	375.00	OR	BASIC FEE	750.00	
TC	TAL CHARGEA	BLE CLAIMS	mir	nus 20=	*		X\$ 9	9=	.0 8	OR	X\$18=		
INE	DEPENDENT CL	AIMS	minus 3 =				X42	=		OR	X84=		
ML	JLTIPLE DEPEN	IDENT CLAIM PI	RESENT	+140	,_ 		1	+280=					
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA			OR	TOTAL		
CLAIMS AS AMENDED - PART II							, , , ,			10	OTHER	THAN	
	V	(Column 1)		(Colur	nn 2)	(Column 3)	SMALL ENTITY			OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	* //	Minus	** 🛇	20	=	X\$ 9	)=		OR	X\$18=		
AME	Independent	* / NTATION OF MI	Minus	***	3	=/	X42	=		OR	X84=		
	FINOT PRESE	NTATION OF MI	JETIPLE DEI	PENDENT	CLAIM	<u>/                                    </u>	+140	)=	• • •	OR	+280=		
	<i>F</i> .					TO ADDIT. F			OR	TOTAL ADDIT. FEE			
	E												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 7	Minus.	** ~	20	=	X\$ 9	=		OR	X\$18=		
	Independent	* NTATION OF MU	Minus	***	<u>3</u>	-	X42:			OR	X84=		
<b>!</b> —	1			ENDEN			+140	= '	1	OR	+280=		
							TO ADDIT. F	TÄL		OR	TÖTAL ADDIT. FEE	0 · . <del></del>	
		(Column 1)		(Colur	nn 2)	(Column 3)	ADDII. I						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE-	
	Total	*	Minus	**		=	X\$ 9	_		OR	X\$18=	-	
	Independent	*	Minus	***		=		-					
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		X42=	_		OR	X84=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.									ropriate box				

PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  79/74874														
CLAIMS AS FILED - PART I (Column 1) (Column 2)								ALL E		OR	OTHER			
TC	TAL CLAIMS	•	14		A STATE OF			RATE		1	RATE	FEE		
FO	R 🔆		NUMBER	FILED .	NUMBER EXTRA			ASIC FEE		OR	BASIC FEE	377		
ŢĢ	TAL CHARGEA	BLE CLAIMS	A mir	us 20=	• .			XS 9=.	- :	OR	XS18=	13.1.2		
INC	EPENDENT CI	AIMS	/ mi	nus 3 =	•	•					X80=	15.4%		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT	SENT				X40=	-	OR				
·H	* If the difference in column 1 is less than zero, enter "0" in column 2							+135=	<u> </u>	OR	+270=			
	CLAIMS AS AMENDED - PART II							OTAL		OR	TOTAL	71000		
1	]. <u></u>		(Column 2) (Column 3)					ENTITY	OR	OTHER SMALL E				
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MON	Total	· A 13	Minus	* 2	0	= /		<b>K\$</b> 9=		ОЯ	X\$18=	·		
AME	Independent	• /	Minus		3	=/		X40=		OR	X80=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=			+270=			
							Ľ	TOTAL		OR	TOTAL			
	(Column 1) (Column 2) (Column 3)							ADDIT, FEEOR ADDIT, FEE						
		CLAIMS	74-75-25	HIGH	EST	1			ADDI-	1		ADDI-		
AMENDMENT B	·	REMAINING AFTER AMENDMENT		PREVIC PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
NON	Total	• . [.]	Minus	ئے	20	= '/		<b>×\$</b> ∙9=		OR	X\$18=	_		
AME	independent	• /	Minus		3_	-/		X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=		OR	+27.0=			
,							L	TOTAL	<b></b> -		TOTAL			
٠	. (Column 1) (Column 2) (Column 3)								<u> </u>	1011	ADDIT. FEE			
၁	"in	CLAIMS .	F 200	HIGH	EST				ADDI-	1		ADDI-		
AMENDMENT (	માર્ગિક ક	REMAINING AFTER AMENDMENT	n de l'estate	NUM PREVIO PAID	DUSLY	PRESENT		PATE	TIONAL FEE		RATE	TIONAL FEE		
NON	Total	· //	Minus	. 6	20	- /		X\$ 9=		OR	X\$18=			
AME	Independent	NTATION OF M	Minus		3	=/		X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=		OR	+270=			
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR  ADDIT. FEE  OR  OR  OR  OR  OR  OR  OR  OR  OR														
				The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										

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